PATENT APPLICATION FEE DETERMINATION RECOF Effective October 1, 2000									09/885-339				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			63				1	RATE	: T	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			63minus 20=		• 43			X\$ 9=			OR	V040	724
INDEPENDENT CLAIMS			g minus 3 =		6			X40=				X80=	
MU	LTIPLE DEPEN	IDENT CLAIM PI							╅		OR		480
• If	the difference	in column 1 is	ess than zero, enter "0" in			olumn 2	+135=			· ·	OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL			OR	TOTAL	1964	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMAL	LEN	YTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	T	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 44	Minus	6	3	= 1		X\$ 9=			OR	X\$18=	
	Independent	. 4	Minus	***	9	= 4	Ì	X40=	1		OR	X80=	
Ц.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /						l	+135=			OR	+270=	
	9-13-	5 Y					L	TOTA	_		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)		10011. FE	- L		l,	ADDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY FOR	PRESENT EXTRA		RATE	Т	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.3/	Minus	6	3	=		X\$ 9=			OR	X\$18=	_
	Independent	NTATION OF ML	Minus	ENIDENT	CLAIM.	-		X40=			OR	X86=	
	TINOT PRESE	INTATION OF MIC	CHPLE DEF	CINDENT	CLAIM			+135=			OR	300 + 270=	
							_ _	TOTA			OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colun		(Column 3)							
AMENDMENT C	22.	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA		RATE	T	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=	ï
	Independent	•	Minus	***		=	r	X40=	1		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								十				
٠,	* If the entry in column 1 is less than the entry in column 2, write *0* in column 3.							+135= TOTA	\bot		OR	+270=	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								E L			TOTAL ADDIT. FEE	
	The "Highest Num	ber Previously Paid	d For" (Total or	Independe	ent) is the	highest number	four	nd in the a	ppro	priate box	in col	umn 1.	
ORM	PTO-875											ADTIVENT OF	لبسب

FORM PTQ-879 (Rev. 8/00)

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